

DEPARTMENT OF THE ARMY  
HEADQUARTERS, WALTER REED ARMY MEDICAL CENTER  
6900 Georgia Avenue, NW  
Washington, DC 20307-5001

HR-3 Nursing Policy

21 July 2005

**Nursing Licensure**

**1. PURPOSE:** To establish a process to ensure all registered nurses and licensed practical nurses are appropriately licensed.

**2. SCOPE:** This policy applies to all nursing personnel at Walter Reed Army Medical Center.

**3. REFERENCES:**

- a. AR 40-68, Clinical Quality Management, 26 Feb 2004.
- b. DA Pam 611-21, Military Occupational Classification and Structure, 31 March 1999.
- c. WRAMC Reg 600-1, Human Resources, 27 January 2003.
- d. Nurse Practice Act, Annotated Code of Maryland Health Occupations Article, Title 8, Code of Maryland Regulations, Title 10, Subtitle 27, 10.27.01.14, Expiration of License, page 1566.

**4. RESPONSIBILITIES:**

- a. The Deputy Commander for Nursing oversees licensure verification of all registered nurses and licensed practical nurses at WRAMC, ensuring that nursing practice throughout the organization is in accordance with professional, military and Medical Center standards.
- b. The Nursing Human Resource Office (HRO) will prime source verify licensure for all registered nurses and licensed practical nurses, military and civilian, regardless of departmental affiliation, with the exception of advanced practice nurses. The Hospital Credentials Office will verify and monitor licensure for advanced practice nurses who are privileged providers at WRAMC.
- c. First-line supervisors will ensure that all subordinates maintain a current and valid license, and license information will be updated prior to expiration.

d. Individual registered nurses and licensed practical nurses are responsible for maintaining a current, unrestricted license to practice nursing. Individuals are also responsible for ensuring current licensure data is reported to the Human Resource Office in a timely manner. Currently, Maryland is the only state that grants a 30 day grace period for licensure renewal.

## **5. POLICY - Licensure**

a. All registered nurses and licensed practical/vocational nurses will maintain a license that is current, valid and unrestricted from a U.S. jurisdiction.

b. RNs and LPNs are required to pass the Nursing Council for Licensure Examinations Registered Nurse or National Council for Licensure Examination Practical Nurse before working without supervision within their scope of practice. In instances where a nurse holds both an RN and an LPN license, the nurse will be held accountable to the scope of practice of the position for which he/she was hired.

c. License information (or the actual license if it is available) will be furnished to the Nursing HRO so prime source verification can be performed. Prime Source Verification is conducted by verifying licensure status with the appropriate State Board of Nursing. This is usually done using the state board's web site, but can also be done over the phone if necessary.

d. The Nursing HRO will report licensure status monthly to the supervisory chain and the Nursing Leadership Committee. The Centralized Credentials and Quality Assurance System (CCQAS) is the current database mandated by MEDCOM for use for licensure tracking.

e. A registered nurse or licensed practical nurse who fails to maintain a current nursing license will be removed from clinical duties and appropriate action will be taken. Civilian employees may be sent home on leave without pay if they cannot demonstrate that they have a current, valid and unrestricted license. Contract employees will be released from work immediately without pay if they fail to meet this requirement. Military personnel will be removed from the clinical patient care setting.

## **6. POLICY – 91WM6 Graduates**

a. The 91WM6 program graduate must obtain a license as a practical nurse within 12 months of completion of the initial professional school and/or training.

b. Supervision of unlicensed 91WM6 personnel:

1) All unlicensed 91WM6 personnel will practice under supervision of a licensed nurse.

2) The immediate supervisor will determine appropriate level of supervision after assessment of the practitioner's competence and capability to perform duties within the 91WM6 scope of practice.

3) Limitations on the unlicensed 91WM6 scope of practice will be based on the supervisor's assessment of the individual's performance and WRAMC policy.

4) The immediate supervisor will:

- a) Monitor and document the practice of unlicensed personnel quarterly.
- b) Maintain an individualized plan of supervision.
- c) Address the 91WM6's level of competency based upon assessment of education and training, skills and knowledge, experience and certification (if appropriate).
- d) Identify which tasks and duties stated in the 91WM6 Scope of Practice the individual may perform. At no time will the unlicensed 91WM6 be permitted to perform the unauthorized duties outlined in 5e(3).

e) The unlicensed 91WM6 and the immediate supervisor will sign the plan of supervision.

c. Utilization of unlicensed 91WM6 personnel:

1) The unlicensed 91WM6 may perform the tasks and duties in the 91WM6 scope of practice IAW the individual's training and demonstrated competence except as indicated below.

2) The unlicensed 91WM6 may function in related areas if appropriately certified or licensed, for example may work in the Emergency Room if nationally certified as an EMT.

3) The unlicensed 91WM6 **WILL NOT**:

- a) Supervise.
- b) Prepare and administer medications, except immunizations if certified (91W task).
- c) Instruct patients to take prescribed medications.
- d) Maintain a controlled substances register.

e) Administer or maintain intravenous fluids with additives to include fluids used in dialysis.

f) Maintain heparin locks.

g) Assist with blood transfusions.

h) Organize work schedules, assign duties or instruct subordinates.

i) Evaluate personnel performance, counsel personnel or prepare evaluation reports.

d. Management of unlicensed 91WM6 personnel:

1) During the 12 months after initial schooling/training, favorable personnel actions for the 91WM6 will not be contingent upon licensure.

2) All 91WM6 personnel who do not take the NCLEX-PN within 12 months of completion of initial schooling/training, or who fail the exam twice will be reclassified.

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